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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/155,796	11/30/1998	TOMOHISA YAMAGUCHI	925-142P	9143
7	590 06/20/2003			
BIRCH STEWART KOLASCH & BIRCH			EXAMINER	
P O BOX 747 FALLS CHURCH, VA 22040		BUI, KIEU OANH T		
			ART UNIT	PAPER NUMBER

DATE MAILED: 06/20/2003

Please find below and/or attached an Office communication concerning this application or proceeding.

	Application No.	Applicant(s)
Interview Summary	09/155,796	YAMAGUCHI, TOMOHISA
merview dummary	Examiner	Art Unit
	Andrew Faile	2611
All participants (applicant, applicant's representative, PT	O personnel):	
(1) Andrew Faile.	(3)	
(2) <u>Michael Mutter</u> .	(4)	
Date of Interview: <u>17 June 2003</u> .	·	
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant	2) applicant's representa	tive]
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.	,
Claim(s) discussed: None.		•
Identification of prior art discussed: None.		
Agreement with respect to the claims f)⊠ was reached.	g) was not reached. h)	□ N/A.
Substance of Interview including description of the gene reached, or any other comments: <u>The Final Office Action be forthcoming.</u>	ral nature of what was agreed on mailed 12/5/02 has been va	t to if an agreement was cated. A new Office Action will
(A fuller description, if necessary, and a copy of the ame allowable, if available, must be attached. Also, where no allowable is available, a summary thereof must be attach	copy of the amendments that	agreed would render the claims at would render the claims
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE INTERVIEW. (See MPEP Section 713.04). If a reply to t GIVEN ONE MONTH FROM THIS INTERVIEW DATE TO INTERVIEW. See Summary of Record of Interview requi	he last Office action has alrea O FILE A STATEMENT OF T	ady been filed, APPLICANT IS HE SUBSTANCE OF THE
	SUPERVISO TECHNO	NDREW FAILE ORY PATENT EXAMINER OLOGY CENTER 2600
Examiner Note: You must sign this form unless it is an		
Attachment to a signed Office action.	Examiner's s	ignature, if required